

General

Title

Cutaneous melanoma: proportion of patients with unresectable stage III or IV cutaneous melanoma who have their BRAF status checked.

Source(s)

NHS Scotland, Scottish Cancer Taskforce. Cutaneous melanoma clinical quality performance indicators. Edinburgh (Scotland): Healthcare Improvement Scotland; 2016 Feb. 32 p. [27 references]

Measure Domain

Primary Measure Domain

Clinical Quality Measures: Process

Secondary Measure Domain

Does not apply to this measure

Brief Abstract

Description

This measure is used to assess the proportion of patients with unresectable stage III or IV cutaneous melanoma who have their BRAF status checked.

Note from the National Quality Measures Clearinghouse: This measure is part of the Cancer Quality Performance Indicators (QPIs) collection. For more information, including a complete list of QPI measure sets, please visit the [Healthcare Improvement Scotland Web site](#)

Rationale

BRAF inhibitors, such as vemurafenib, significantly increase overall survival and progression-free survival compared with current standard chemotherapy for patients with previously untreated unresectable stage III or stage IV melanoma with V600 BRAF mutation (Scottish Medicines Consortium [SMC], 2013; Chapman et al., 2011).

Patients with unresectable stage IIIC and IV melanoma should undergo a BRAF status check to assess

suitability for vemurafenib (SMC, 2013; Alberta Provincial Cutaneous Tumour Team, 2012).

As many patients with IIIC disease will not have undergone surgery, making pathological staging impossible, the Cutaneous Melanoma Quality Performance Indicator (QPI) Development Group have therefore agreed to measure all stage III patients within this QPI.

Evidence for Rationale

Alberta Provincial Cutaneous Tumour Team. Systemic therapy for unresectable stage III or metastatic cutaneous melanoma. Edmonton (Alberta): Alberta Health Services, Cancer Care; 2012 Mar. 10 p. (Clinical practice guideline; no. CU-012). [48 references]

Chapman PB, Hauschild A, Robert C, Haanen JB, Ascierto P, Larkin J, Dummer R, Garbe C, Testori A, Maio M, Hogg D, Lorigan P, Lebbe C, Jouary T, Schadendorf D, Ribas A, O'Day SJ, Sosman JA, Kirkwood JM, Eggermont AM, Dreno B, Nolop K, Li J, Nelson B, Hou J, Lee RJ, Flaherty KT, McArthur AG, BRIM-3 Study Group. Improved survival with vemurafenib in melanoma with BRAF V600E mutation. N Engl J Med. 2011 Jun 30;364(26):2507-16. [PubMed](#)

NHS Scotland, Scottish Cancer Taskforce. Cutaneous melanoma clinical quality performance indicators. Edinburgh (Scotland): Healthcare Improvement Scotland; 2016 Feb. 32 p. [27 references]

Scottish Medicines Consortium (SMC). Vemurafenib 240mg film-coated tablet (Zelboraf®). [internet]. Glasgow (Scotland): Scottish Medicines Consortium (SMC); 2013 Dec 9.

Primary Health Components

Stage III or IV cutaneous melanoma; BRAF status

Denominator Description

All patients with unresectable stage III or IV cutaneous melanoma

Numerator Description

Number of patients with unresectable stage III or IV cutaneous melanoma who have their BRAF status checked (see the related "Numerator Inclusions/Exclusions" field)

Evidence Supporting the Measure

Type of Evidence Supporting the Criterion of Quality for the Measure

A clinical practice guideline or other peer-reviewed synthesis of the clinical research evidence

A formal consensus procedure, involving experts in relevant clinical, methodological, public health and organizational sciences

One or more research studies published in a National Library of Medicine (NLM) indexed, peer-reviewed journal

Additional Information Supporting Need for the Measure

Unspecified

Extent of Measure Testing

The collection of data is piloted on a small number of patient records using a paper data collection form produced by the Information Services Division (ISD). The aim is to identify any anomalies or difficulties with data collection prior to full implementation. At least one NHS board in each Regional Cancer Network participates in the pilot.

Evidence for Extent of Measure Testing

NHS Scotland. National cancer quality performance indicators: overview of development process. Edinburgh (Scotland): NHS Scotland; 2012 Dec. 7 p.

State of Use of the Measure

State of Use

Current routine use

Current Use

not defined yet

Application of the Measure in its Current Use

Measurement Setting

Ambulatory/Office-based Care

Hospital Outpatient

Professionals Involved in Delivery of Health Services

not defined yet

Least Aggregated Level of Services Delivery Addressed

Single Health Care Delivery or Public Health Organizations

Statement of Acceptable Minimum Sample Size

Unspecified

Target Population Age

Unspecified

Target Population Gender

Either male or female

National Strategy for Quality Improvement in Health Care

National Quality Strategy Aim

Better Care

National Quality Strategy Priority

Prevention and Treatment of Leading Causes of Mortality

Institute of Medicine (IOM) National Health Care Quality Report Categories

IOM Care Need

Living with Illness

IOM Domain

Effectiveness

Data Collection for the Measure

Case Finding Period

Unspecified

Denominator Sampling Frame

Patients associated with provider

Denominator (Index) Event or Characteristic

Clinical Condition

Denominator Time Window

not defined yet

Denominator Inclusions/Exclusions

Inclusions

All patients with unresectable stage III or IV cutaneous melanoma

Exclusions

None

Exclusions/Exceptions

not defined yet

Numerator Inclusions/Exclusions

Inclusions

Number of patients with unresectable stage III or IV cutaneous melanoma who have their BRAF status checked

Note: *BRAF*: Specific genetic marker that when mutated allows tumour cells to be killed off with a specific class of anti-cancer drugs.

Exclusions

None

Numerator Search Strategy

Fixed time period or point in time

Data Source

Electronic health/medical record

Paper medical record

Type of Health State

Does not apply to this measure

Instruments Used and/or Associated with the Measure

Unspecified

Computation of the Measure

Measure Specifies Disaggregation

Does not apply to this measure

Scoring

Rate/Proportion

Interpretation of Score

Desired value is a higher score

Allowance for Patient or Population Factors

not defined yet

Standard of Comparison

not defined yet

Prescriptive Standard

Target: 75%

The tolerance level within this target is designed to account for situations where there is insufficient tissue to assess the BRAF status, and for patients with stage IIIA or IIIB disease where it is not clinically appropriate to test for BRAF status. In addition the tolerance accounts for situations where patients may have significant co-morbidities or may not be fit for investigation and/or treatment and for patient choice.

Evidence for Prescriptive Standard

NHS Scotland, Scottish Cancer Taskforce. Cutaneous melanoma clinical quality performance indicators. Edinburgh (Scotland): Healthcare Improvement Scotland; 2016 Feb. 32 p. [27 references]

Identifying Information

Original Title

QPI 8 – BRAF status.

Measure Collection Name

Cancer Quality Performance Indicators (QPIs)

Measure Set Name

Cutaneous Melanoma

Submitter

NHS Scotland - National Government Agency [Non-U.S.]

Scottish Cancer Taskforce - National Government Agency [Non-U.S.]

Developer

NHS Scotland - National Government Agency [Non-U.S.]

Scottish Cancer Taskforce - National Government Agency [Non-U.S.]

Funding Source(s)

Scottish Government

Composition of the Group that Developed the Measure

Cutaneous Melanoma QPI Development Group

Financial Disclosures/Other Potential Conflicts of Interest

Unspecified

Adaptation

This measure was not adapted from another source.

Date of Most Current Version in NQMC

2016 Feb

Measure Maintenance

The Cancer Quality Performance Indicators (QPIs) will be kept under regular review and be responsive to changes in clinical practice and emerging evidence.

Date of Next Anticipated Revision

2017 Dec

Measure Status

This is the current release of the measure.

Measure Availability

Source document available from the [Healthcare Improvement Scotland Web site](#) .

For more information, contact the Healthcare Improvement Scotland at Gyle Square, 1 South Gyle Crescent, Edinburgh, Scotland EH12 9EB; Phone: 0131 623 4300; E-mail: comments.his@nhs.net; Web site: www.healthcareimprovementscotland.org/ .

Companion Documents

The following is available:

NHS Scotland. National cancer quality performance indicators: overview of development process. Edinburgh (Scotland): NHS Scotland; 2012 Dec. 7 p. This document is available from the [Healthcare Improvement Scotland Web site](#) .

NQMC Status

This NQMC summary was completed by ECRI Institute on June 16, 2017.

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Production

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